FORM D

PROCESSED

Unginally-Executed Version UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

OMB APPROVAL						
OMB NUMBER:	3235-0076					
Expires:	April 30, 2008					
Estimated aver	age burden					
nours per respo	onse 16.00					

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		UNIFORM LIMITED	OFFERIN	IG EXEN	IPTION		A RECEI	VED
Name of Offering	(check if this is a	n amendment and name has	changed, and	indicate cha	ange.)		I	LJ
Riverview Multi-	Series Fund LLC – R	elating to Class Intrepid M	embership In	iterests				
Filing Under (Che	k box(es) that apply):	□ Rule 504 □ Ri	ule 505	⊠ Rule 50	6 □ Sec	tion 4(6)	⊃ ñrö	E
Type of Filing:	☐ New Filing:		J, OH, NY, V	/A		!	CE Pres	-
		A. BASIC IDENT	IFICATION	DATA		•	196	
1. Enter the inform	ation requested about	the issuer						
Name of Issuer (check if this is an	amendment and name has cha	anged, and inc	dicate chang	ge.)		1	-718 114
Riverview Multi-	Series Fund LLC							
Address of Execut		(Number and Street, City,		ode)	Telephone Nu	ımber (İnç	luding Are	a Code)
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Riverview Alternative Investment Advisors LLC, 2 Bridge Avenue, Galleria Telephone Number (Incl. 732-936-2880)								
	oor, Red Bank, New						10	
Address of Princip	al Business Operation	s (Number and Street, City	, State, Zip Co	ode)	Telephone Nu	ımber (Inc	luding Are	ea Code)
(if different from I	Executive Offices) Sa	me as above.			Same as abo	ve.		
Brief Description	of Business: Investm	ents in securities.						
Type of Business (Organization							
□ corporation		limited partnership, already	formed	X	other (please	e specify):	Limited I	_iability
□ business trus	t 📮	limited partnership, to be for	med		Compa	iny		OEL.
	•	Month	Year	7				TELET CATES COMON
Actual or Estimated	Date of Incorporation	or Organization: 0 5	0 5		Actual 🗆	Estimated	Ψ	Collon
		tion: (Enter two-letter U.S. Po	ostal Service a	abbreviation	for State:		469	1 4 2008
		nada; FN for other foreign ju					• • • • • • • • • • • • • • • • • • • •	/ 1000
GENERAL INSTR							3A11-	in etem DC
Who Must File: All i	ssuers making an offer	ing of securities in reliance on	an exemption	under Regu	lation D or Se	ection 4(6),	17 CFR 2.	ington, DC

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopics of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering exemption (ULOE) for sales of securities in those state that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



			A. DASIC IDENTIF	ICATION DATA				
	the information req		_					
	•		has been organized with		on of 10% or n	nore of a class of equity		
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
	Each executive office ssuers; and	er and director of co	rporate issuers and of co	rporate general and mar	aging general p	partners of partnership		
	each general and ma	naging partner of pa	artnership issuers.					
Check E	Box(es)that Apply:	☑ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners		
	me (Last name first, ew Alternative Inv		LLC (the "Managing M	(ember")				
			Street, City, State, Zip Coor, Red Bank, New Jer					
Check E	Box(es)that Apply:	□ Promoter	☐Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners		
Full Nar	me (Last name first, G. Peter	if individual)						
			Street, City, State, Zip Coor, Red Bank, New Jer					
Check E	Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☑ General and/or Managing Partners		
Full Nat Turi, St	me (Last name first, teven J.	if individual)						
			Street, City, State, Zip Coor, Red Bank, New Jer					
Check E	Box(es)that Apply:	☐ Promoter	🗷 Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners		
	me (Last name first, Global Custody (NA		ew Multi-Series Fund I	LLC Series N				
			Street, City, State, Zip Coor, Red Bank, New Jer					
Check E	Box(es)that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners		
	me (Last name first, ew LLC	if individual)						
Busines 2 Bridg	s or Residence Add e Avenue, Galleria	ress (Number and Building 6, 2 nd Flo	Street, City, State, Zip Coor, Red Bank, New Jer	Code) rsey 07701				
Check E	Box(es)that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners		
	me (Last name first, wide Life Insuranc	•	erica					
	s or Residence Add nwide Plaza, Colui		Street, City, State, Zip C	Code)				
Check E	Box(es)that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partners		
Full Nat	me (Last name first,	if individual)						
Busines	s or Residence Add	ress (Number and	Street, City, State, Zip C	Code)				
(Use blan	k sheet, or copy and	l use additional copi	ies of this sheet, as neces	ssary.).				

				B.	INFORMA'	TION ABOU	T OFFERI	NG				·····
			_								Yes	
1. Has the	issuer sold,	or does the								**.**********	⊔	X
Answer also in Appendix, Column 2, if filing under ULOE.												
2. What is the minimum investment that will be accepted from any individual?							\$ <u>1,0</u>	<u>*000,000</u>				
*Subje	ct to the red	luction at th	e discretion	of the Fun	d's Managiı	ng Member.						
*********	•••••									•••••••		No
3. Does the	e offering p	ermit joint o	ownership o	f a single u	nit?	•••••	••••••			••••••	X	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated person of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
	- (,									
Business	or Residen	ce Address	(Number	and Street	t, City, Stat	e, Zip Code	e)					
Name of A	Associated	Broker or	Dealer									
States in V	Which Pers	on Listed l	nas Solicite	d or Intend	s to Solicit	Purchasers						
(Check	"All States	" or check	individual (States)							🗆	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL.]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	e (Last nam											
	`	,	ŕ									
Business	or Residen	ce Address	(Number	and Stree	t, City, Stat	e, Zip Cod	e)					
Name of	Associated	Broker or	Dealer						. <u></u>		<u> </u>	
States in 1	Which Pers	on Listed I	nas Solicite	d or Intend	ls to Solicit	Purchasers						
								**************			🗖	All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
(MT)	[NE]	[NV]	[NH]	[ИЛ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	e (Last nam			()	[0.]	[,-]	[]	[···]	, · · · · · ·	[]	[]	(* **)
Business	or Residen	ce Address	(Number	and Stree	t, City, Stat	e, Zip Code	e)					
Name of	Associated	Broker or	Dealer									
States in Which Person Listed has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)												
[AT]	(AV)	[A 7 7	[AD]	[CA]	[CO]	[CT]	[DE]	[DC]	ו זמן	[GA]	[HI]	[ID]
[AL]	[AK]	[AZ]	[AR]	[CA]		[CT]		-	[FL]			
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
. Enter the aggregate offing price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero". If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange		
and already exchanged.		
Type of Security Debt	Aggregate Offering Amount \$0	Amount Already Sold \$ 0
Equity	\$0	\$0
• •	<u> </u>	4 <u>U</u>
☐ Common ☐ Preferred Convertible Securities (including warrants)	\$0	\$ 0
Partnership Interests	\$0	\$ 0
Other (Specify)This is an offering of a class of membership interests, referred to as	\$5,000,000,000 ¹	\$ <u>401,819,762</u>
class intrepid ("class intrepid") representing interests in the company's class intrepid portfolios	\$ <u>3,000,000,000</u>	\$ <u>401,819,702</u>
Total	\$ <u>5,000,000,000</u>	\$ <u>401,819,762</u>
Answer also in Appendix, Column 3, if filing under ULOE		
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero".		
	Nimelean	Aggregate
	Number Investors	Dollar Amount of Purchases
Accredited Investors	11	\$_401,819,762
Non-accredited Investors	0	\$ 0
Total (for filings under Rule 504 only)	N/A	\$ N/A
Answer also in Appendix, Column 4, if filing under ULOE		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505	N/A	\$_0
Regulation A	N/A	\$ <u>0</u>
Rule 504	N/A	\$ <u>0</u>
Total	N/A	\$ <u>0</u>
I. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$ 0
Printing and Engraving Costs		_
Legal Fees.		_
Accounting Fees.		_
Engineering Fees.		
Sales Commissions (specify finder's fees separately)		
Other Expenses (identify). Miscellaneous Blue Sky Filing Fees and Expenses		
Total	is:	\$ 95,000

b. Enter the difference between the aggregate offering pri Question 1 and the total expenses furnished in response to Part the "adjusted gross proceeds to the issuer"	S	\$ <u>4,999,905,000</u>			
5. Indicate below the amount of the adjusted gross proceeds to the for each of the purposes shown. If the amount for any purpose and check the box to the left of the estimate. The total of the adjusted gross proceeds to the issuer set froth in response to Part	e is not known, furnish an e he payments listed must eq	stimat	e		
Salaries and fees		_	Payments To Officers, Directors, & Affiliates		Payments To Others
Purchase of real estate			\$ 0		\$0
Purchase, rental or leasing and installation of machinery an		_	\$0		\$ 0
			\$ <u>0</u>		\$ 0
Construction or leasing of plant buildings and facilities			\$ 0	_ 0	\$ 0
issuer pursuant to a merger)			\$ 0		\$ 0
• •		\$0		\$ <u>0</u>	
Working capital Other (specify): Investments in securities.			\$ <u>0</u>	_ (\implies)	
Column Totals Total Payments Listed (column totals added)		•	 \$ <u>_4,999</u>	\$ <u>4,999,905,000</u> ,905,000	
D. FEDE	RAL SIGNATURE	-			
The issuer has duly caused this notice to be signed by the under following signature constitutes an undertaking by the issuer to furthe information furnished by the issuer to any non-accredited investigation.	rnish to the U.S. Securities	Com	mission, upon v		
Issuer (Print or Type)	Signature			Date	
Riverview Multi-Series Fund LLC				Apr	117,2008
Name of Signer (Print or Type) By: Riverview Alternative Investment Advisors LLC, Managing Member By: G. Peter Todd	Title of Signer (Print or Principal	Type)			

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

END